

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10656617**

FILING DATE **09-25-03**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1	1			
3		2		2		
4		1		2		
5		1		2		
6		1		2		
7		1		2		
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TOTAL IND.	1		2			
TOTAL DEP.	7		10			
TOTAL CLAIMS	8		12			

	A		B		C	
	IND	DEP	IND	DEP	IND	DEP
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